APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention

ELECTRO-OPTIC DISPLAYS

Application Type: regular, utility

Attorney Docket Number: H-357

Correspondence address:

Customer Number: 26245

Continuing Data:

This is a Non-Provisional of US application number 60319516, filed 2003-09-03, now Pending.

Inventors Information:

Inventor 1:

Applicant Authority Type: Inventor

Citizenship: US
Name prefix: Mr.
Given Name: Gregg
Middle Name: M.

Family Name: Duthaler

Residence:

City of Residence: Needham

State of Residence: MA
Country of Residence: US

Address-1 of Mailing Address: 40 Dunster Road

Address-2 of Mailing Address:

City of Mailing Address: Needham

State of Mailing Address: MA

Postal Code of Mailing Address: 02494

Country of Mailing Address: US

Phone: Fax: E-mail:

Inventor 2:				
Applicant Authority Type:	Inventor			
Citizenship:	US			
Name prefix:	Mr.			
Given Name:	Karl			
Middle Name:	R.			
Family Name:	Amundson			
Residence:				
City of Residence:	Cambridge			
State of Residence:	MA			
Country of Residence:	US			
Address-1 of Mailing Address:	91 Trowbridge Street, Apartment No. 21			
Address-2 of Mailing Address:				
City of Mailing Address:	Cambridge			
State of Mailing Address:	MA			
Postal Code of Mailing Address:	02138			
Country of Mailing Address:	US			
Phone:				
Fax:				
E-mail:				
Inventor 3:				
Applicant Authority Type:	Inventor			
Citizenship:	US			
Name prefix:	Mr.			
Given Name:	Barrett			
Family Name:	Comiskey			
Residence:				
City of Residence:	Palo Alto			
State of Residence:	CA			
Country of Residence:	US			
Address-1 of Mailing Address:	1237 Alma Street			
Address-2 of Mailing Address:				
City of Mailing Address:	Palo Alto			
State of Mailing Address:	CA			
Postal Code of Mailing Address:	94301			
Country of Mailing Address:	US			
Phone:				
_				
Fax:				
Fax: E-mail:				

Inventor 4:				
Applicant Authority Type:	Inventor			
Citizenship:	US			
Name prefix:	Mr.			
Given Name:	Mr. Holly			
Middle Name:	Holly G.			
Family Name:	Gates			
Residence:	dates			
City of Residence:	Somerville			
State of Residence:	Somerville MA			
Country of Residence:	US			
Address-1 of Mailing Address:	189 Summer Street, Apartment No. 2			
Address-2 of Mailing Address:	109 Summer Street, Apartment No. 2			
City of Mailing Address:	Somerville			
State of Mailing Address:	MA			
Postal Code of Mailing Address:	02143			
Country of Mailing Address:	US			
Phone:				
Fax:				
E-mail:				
Inventor 5:				
Inventor 5: Applicant Authority Type:	Inventor			
Applicant Authority Type:	Inventor MX			
Applicant Authority Type: Citizenship:	MX			
Applicant Authority Type: Citizenship: Name prefix:	MX Mr.			
Applicant Authority Type: Citizenship: Name prefix: Given Name:	MX Mr. Alberto			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name:	MX Mr.			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence:	MX Mr. Alberto Goenaga			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name:	MX Mr. Alberto			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence:	MX Mr. Alberto Goenaga Nashua			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence:	MX Mr. Alberto Goenaga Nashua NH US			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence:	MX Mr. Alberto Goenaga Nashua NH			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9 Nashua			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9 Nashua NH			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: City of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9 Nashua NH 03060			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address: Country of Mailing Address:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9 Nashua NH 03060			
Applicant Authority Type: Citizenship: Name prefix: Given Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address: Country of Mailing Address: Postal Code of Mailing Address: Phone:	MX Mr. Alberto Goenaga Nashua NH US 2 Royal Crescent Drive, Apartment No. 9 Nashua NH 03060			

Inventor 6:	
Applicant Authority Type:	Inventor
Citizenship:	US
Name prefix:	Mr.
Given Name:	John
Middle Name:	E.
Family Name:	Ritter
Residence:	
City of Residence:	Westford
State of Residence:	MA
Country of Residence:	US
Address-1 of Mailing Address:	15 Flagg Road
Address-2 of Mailing Address:	
City of Mailing Address:	Westford
State of Mailing Address:	MA
Postal Code of Mailing Address:	01886
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 7:	
Applicant Authority Type:	Inventor
Applicant Authority Type: Citizenship:	Inventor US
Citizenship:	
	US Mr.
Citizenship: Name prefix:	US
Citizenship: Name prefix: Given Name: Middle Name:	US Mr. Michael L.
Citizenship: Name prefix: Given Name:	US Mr. Michael
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence:	US Mr. Michael L. Steiner
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence:	US Mr. Michael L. Steiner Methuen
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence:	US Mr. Michael L. Steiner Methuen MA
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence:	US Mr. Michael L. Steiner Methuen MA US
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address:	US Mr. Michael L. Steiner Methuen MA
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen MA
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen MA 01844
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address: Country of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen MA
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address: Country of Mailing Address: Phone:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen MA 01844
Citizenship: Name prefix: Given Name: Middle Name: Family Name: Residence: City of Residence: State of Residence: Country of Residence: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address: State of Mailing Address: Postal Code of Mailing Address: Country of Mailing Address:	US Mr. Michael L. Steiner Methuen MA US 12 Vista Circle Methuen MA 01844

Inventor 8:				
Applicant Authority Type:	Inventor			
Citizenship:	US			
Name prefix:	Mr.			
Given Name:	Russell			
Middle Name:	J.			
Family Name:	Wilcox			
Residence:				
City of Residence:	Natick			
State of Residence:	MA			
Country of Residence:	US			
Address-1 of Mailing Address:	17 Winnemay Street			
Address-2 of Mailing Address:				
City of Mailing Address:	Natick			
State of Mailing Address:	MA			
Postal Code of Mailing Address:	01760			
Country of Mailing Address:	US			
Phone:				
Fax:				
E-mail:				
Inventor 9:				
Applicant Authority Type:	Inventor			
Citizenship:	US			
Name prefix:	Mr.			
Given Name:	Robert			
Middle Name:	W.			
Family Name:	Zehner			
Residence:				
City of Residence:	Arlington			
State of Residence:	MA			
Country of Residence:	US			
Address-1 of Mailing Address:	7 Edith Street			
Address-2 of Mailing Address:				
City of Mailing Address:	Arlington			
State of Mailing Address:	MA			
Postal Code of Mailing Address:	02474			
Country of Mailing Address:	US			
Phone:				
Fax:				
E-mail:				

Inventor 10:

Applicant Authority Type: Inventor

Citizenship: US
Name prefix: Mr.

Given Name: Anthony
Middle Name: Edward
Family Name: Pullen

Residence:

City of Residence: Belmont

State of Residence: MA
Country of Residence: US

Address-1 of Mailing Address: 95 Hull Street

Address-2 of Mailing Address:

City of Mailing Address: Belmont

State of Mailing Address: MA

Postal Code of Mailing Address: 02478

Country of Mailing Address: US

Phone: Fax: E-mail:

Attorney Information:

practitioner(s) at Customer Number:

26245

as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Assignee 1:

Organization Name: E Ink Corporation

Address-1 of Mailing Address: 733 Concord Avenue

Address-2 of Mailing Address:

City of Mailing Address: Cambridge

State of Mailing Address: MA

Postal Code of Mailing Address: 02138-1002

Country of Mailing Address: US

Phone:

Fax:			
E-mail	:		